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SCHEDULE B (FECForm 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Democratic Senatorial Campaign Commercial Campaig	e and address of any politic	ed by any perso	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. Gudrun Kamps			Date of Disbursement
Mailing Address 228 Rockridge Cir. City State Zip Code			05 31 2015 Transaction ID : SB28A-106144
Purpose of Disbursement Contribution Refund Candidate Name Office Sought: House Disbursem	· · · · · · · · · · · · · · · · · · ·	Category/ Type	Amount of Each Disbursement this Period
	Primary General Other (specify) ▼		
B. Israel Kupiec Mailing Address 6 Glen Terrace			Date of Disbursement M
•	tate Zip Code MA 01730	Category/ Type	Amount of Each Disbursement this Period 45.00
	ent For: Primary ☐ General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. Colleen Murray Mailing Address 4584 Broadview Dr.			Date of Disbursement D D V V V V V V V V
City S Morgantown V Purpose of Disbursement Contribution Refund Candidate Name Office Sought: House Disbursem Senate S	tate Zip Code NV 26505 Tent For: Primary General Other (specify) Total	Category/ Type	Transaction ID : SB28A-106146 Amount of Each Disbursement this Period 20.00
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).		·····	68.00